CITY OF LOS ANGELES SPEAKER CARD

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Date 2/21/17 I wish to speak before the	THE CITY COUNCED TO THE CI	BE ENFORCED.		No., Agenda Item, or Case No.		
	Name of City Agency, De	epartment, Committee or Co	ouncii			
Do you wish to provide general	public comment, or to speal	k for or against a proposal	on the agend	a? () For proposal		
Name:	P. D.Q.	Publishers		() Against proposal General comments		
Business or Organization Affilia	tion: DeQ	Richardson, 1	LC.			
Address:	al .	inglewood	CA	90206		
Street		City	State	Zip		
Business phone:	Representing:	•				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:				Phone #:		
Client Address:						
Street		City	State	Zip		

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

CITY OF LOS ANGELES SPEAKER CARD Winner

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Date 2 - 21 - 17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	e or Council	
Do you wish to provide general	public comment, or to speak for or against a pr	posal on the agenda	? () For proposal
Name:	ntonia a	myez	() Against proposal () General comments -
Business or Organization Affilia	tion:	,	
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Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	OW:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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CITY OF LOS ANGELES SPEAKER

Councilmember Drawing Board

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OF	FICER TO CALL UPON YOU
Date 62 21 2017 THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	
Name of City Agency, Department, Committee	or Council
Do you wish to provide general public comment, or to speak for or against a propo	osal on the agenda? () For proposal Against proposal
Name: Armando Herman — Coun	cilmember Huizar
Busines anization Affiliation:	105
Address: Street Street City	- 100 l
Bu nerb -	OLF SHOW LOW
IF YOU ARE A PAID SPEAKER AND PHONE	WE SEE
Client & FRANCINE	Phone #:
900dy V. Mike F	
Street	State CA Zip 9001 Z

rease see reverse of card for important information and submit this entire card to the presiding officer or chairperson.